2001 DRAFTING REQUEST

Senate Amendme	ent (SA-SSA1-SB55)
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Received	: 06/15/2001				Received By: gra	ntpr	
Wanted: As time permits For: Senate Democratic Caucus			Identical to LRB:				
			By/Representing: Keckhaver				
This file may be shown to any legislator: NO			Drafter: grantpr				
May Con	tact:				Addl. Drafters:	•	
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Prc Top	ic: .Keckhaver - C	N1521,			· .	 	
Topic:			_ `` _				
Children	's vision initiat	ive					
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Senate Amendment (SA-SSA1-SB55)

Received: 06/15/2001	Received By: grantpr					
Wanted: As time permits	Identical to LRB:					
For: Senate Democratic Caucus	By/Representing: Keckhaver Drafter: grantpr					
This file may be shown to any legislator: NO						
May Contact:	Addl. Drafters:					
Subject: Education - school boards	Extra Copies: MJL					
Submit via email: NO						
Requester's email:						
Pre Topic:						
SDC:Keckhaver - CN1521,						
Topic:						
Children's vision initiative						
Instructions:						
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Date:

June 8, 2001

Re:

Caucus Budget Request

Make technical change to Children's Vision Initiative included in omnibus MA Motion 1560, Item 21. (See attached for changes.)

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Children's vision Initiative:

Require all children entering public kindergarten to provide evidence that they have had an eye examination performed by a licensed doctor of optometry or ophthalmology or an eye evaluation by a licensed medical doctor. The evaluation would be required to include: (list of six items in current language).

interded difference?

Representative Gard Senator Moore Senator Plache Senator Decker Representative Huebsch

HEALTH AND FAMILY SERVICES -- MEDICAL ASSISTANCE/FAMILY CARE AND OTHER COMMUNITY-BASED LONG-TERM CARE PROGRAMS

Omnibus Funding Motion

Motion:

Move to modify the bill as follows:

- 1. LFB Paper #465 (MA Base Reestimate). Adopt the modification. Modify funding in the bill by increasing funding by \$31,701,800 GPR and \$91,873,600 SEG and deleting \$82,388,300 FED in 2001-02 and increasing funding by \$17,701,200 GPR and \$102,345,700 SEG and deleting \$46,790,800 FED in 2002-03 to reflect reestimates of the cost to continue the current MA program in the 2001-03 biennium and to reflect the administration's requested revision to this item.
- 2. LFB Paper #466 (Nursing Home Reimbursement). Reduce funding in the bill by \$9,867,700 SEG and \$14,054,000 FED in 2001-02 and by \$10,150,500 SEG and \$14,310,000 FED in 2002-03 to increase the regular per diem rates by 6.00% in 2001-02 and 4.73% in 2002-03, rather than by 8.81% in 2001-02 and 4.73% in 2002-03, as recommended by the Governor. Increase estimated IGT revenues by \$2,810,800 in 2001-02 and \$2,862,000 in 2002-03. Adopt the Governor's recommendation for funding of county supplemental payments by adopting Alternative B1.
- 3. LFB Paper #467 (Estimated IGT Revenues and Creation of IGT Trust Account). Adopt the Governor's recommendations relating to establishing a MA trust fund. However, require DOA to lapse \$108,706,700 of IGT revenue to the general fund on June 30, 2003.
- 4. LFB Paper #468 (Labor Cost Adjustment for Nursing Home Reimbursement). Adopt Alternative 1. Adopt the Governor's recommendation to eliminate the requirement that DHFS establish targets for payment of allowable direct care costs that are adjusted by DHFS for regional labor cost variations.
- 5. LFB Paper #469 (BadgerCare Funding). Adopt the modification under A. Increase funding in the bill by \$1,232,200 GPR, \$2,937,900 FED and \$794,200 PR in 2001-02 and reduce funding by \$102,600 GPR and increase funding by \$191,900 FED and \$893,200 PR in

2002-03 to fund costs for BadgerCare services provided in the 2001-03 biennium.

Adopt Alternative 2B. Maintain the current enrollment trigger, but authorize the Joint Committee on Finance to transfer funds under s. 13.101 of the statutes, from any other GPR appropriation to the BadgerCare appropriation if the Committee determines that funding for BadgerCare is insufficient to fund the benefit costs of the program and: (a) unnecessary duplication of function can be eliminated; (b) more efficient and effective methods of administering programs will result; or (c) legislative intent will be more effectively carried out because of such transfer, and that legislative intent will not be changed as a result of such a transfer. Specify that the Committee does not have to find that an emergency exists to transfer the funding. Maintain the current BadgerCare GPR appropriation as a continuing appropriation.

6. LFB Paper #470 (BadgerCare Eligibility). Adopt Alternative A2. Delete the Governor's provision that would require DHFS to request a waiver extending the period of time that a family or child would have to be without health care coverage, rather than access to health care coverage.

Adopt Alternative B3. Delete the Governor's recommendations relating to verification of whether a family or a child has access or has had access to employer-subsidized health care before enrolling the family or child in BadgerCare.

- 7. LFB Paper #472 (Rates for Noninstitutional Services). Adopt Alternative 3. Reduce funding in the bill by \$4,231,900 SEG and \$5,825,200 FED in 2001-02 and \$9,104,200 SEG and \$12,915,200 FED in 2002-03, but adopt the Governor's recommended allocations for this funding (50% would be provided for across-the-board increases in reimbursement rates for noninstitutional providers and 50% would be provided for rate increases targeted to services with reimbursements that represent no more than 50% of charges). Of the funding that would be provided, \$3,903,500 SEG and \$5,559,500 FED in 2001-02 and \$8,397,500 SEG and \$11,838,700 FED in 2002-03 would be budgeted in the MA benefits appropriation. The remainder would be budgeted in the BadgerCare benefits appropriation.
- 8. LFB Paper #473 (MA Hospital Payments). Adopt Alternative A2. Reduce funding in the bill by \$1,927,100 SEG and \$2,648,600 FED in 2001-02 and \$2,102,100 SEG and \$2,858,300 FED in 2002-03 to increase reimbursement rates for outpatient hospital services so that urban hospitals would receive reimbursements estimated at 85% of a hospital's costs for such services, rather than 93% of a hospital's costs, as recommended by the Governor.

Adopt Alternative B2. Reduce funding in the bill by \$670,400 SEG and \$932,500 FED in 2001-02 and \$726,200 SEG and \$999,400 FED in 2002-03 to increase reimbursement rates for outpatient hospital services so that rural hospitals would receive reimbursements estimated at 85% of a hospital's costs for such services, rather than 100% of a hospital's costs, as recommended by the Governor.

Adopt Alternative C1. Require DHFS to allocate a portion of the funding provided to increase outpatient hospital reimbursements, to fund adjustments in HMO payment rates to ensure

that the current payment rate discount is not decreased as a result of the increase in outpatient hospital reimbursements.

Adopt Alternative D1. Authorize DHFS to transfer funding from the MA benefits appropriation to the BadgerCare appropriation in each year of the 2001-03 biennium to ensure that sufficient funding is provided for increased costs in BadgerCare as a result of increases in the reimbursement rate for outpatient hospital services.

Reduce funding in the bill by \$412,500 SEG and \$587,500 FED in 2001-02 and \$415,000 SEG and \$585,000 FED in 2002-03 so that disproportionate share hospital (DSH) allocations would increase by \$3.0 million annually, rather than \$4.0 million annually, as provided in the Governor's bill.

Increase funding in the bill by \$71,000 SEG and \$101,500 FED in 2001-02 and \$74,500 SEG and \$105,600 FED in 2002-03 to reflect an increase in the supplemental hospital payment for hospitals participating in the MA managed care initiative. This increase would be a one-time increase in the 2001-03 biennium only.

- 9. LFB Paper #474 (Reimbursement Rates for Prescription Drugs). Adopt Alternative 3. Increase funding in the bill by \$1,198,900 GPR and \$1,637,800 FED in 2001-02 and \$3,277,400 GPR and \$4,619,300 FED in 2002-03 to decrease the MA reimbursement rate for brand name prescription drugs from AWP-10% to AWP-12.5%, rather than AWP-15%, as recommended by the Governor.
- 10. LFB Paper #475 (Eligibility for Women Diagnosed with Breast and Cervical Cancer). Adopt Alternative 2. Approve the Governor's recommendations, but reduce funding in the bill by \$4,900 GPR and \$4,900 FED in 2001-02 and \$92,000 GPR and \$195,400 FED in 2002-03 to reflect the estimated benefit costs of expanding MA to cover certain women diagnosed with breast or cervical cancer. This alternative would not provide funding for county administrative costs associated with determining eligibility for MA.

In addition, specify that a women is eligible for MA if a provider, certified to determine presumptive eligibility, determines, based on preliminary information, that the woman would meet the criteria for MA eligibility for women diagnosed with breast or cervical cancer and not otherwise eligible for MA. Establish presumptive eligibility procedures for this population that are consistent with current provisions relating to presumptive eligibility procedures for pregnant women under MA.

- 11. LFB Paper #476 (Treatment of Irrevocable Burial Trusts under MA). Adopt Alternative 5. Delete the Governor's provision to increase the maximum amount of an irrevocable burial trust that may be excluded from an MA applicant's countable assets, from \$2,500 to \$3,300, which would first apply to burial trust agreements entered into on January 1, 2003. Reduce funding in the bill by \$207,800 GPR and \$293,800 FED in 2002-03.
 - 12. LFB Paper #477 (Reimbursement for Hearing Aid Services). Adopt Alternative

- 2. Increase funding in the bill by \$128,200 SEG and \$180,300 FED in 2002-03 to provide a 30% increase in the reimbursement rates for hearing aids and a 15% increase in reimbursement rates for hearing aid-related services.
- 13. LFB Paper #478 (Provider Fraud and Abuse). Adopt Alternative 3. Increase funding in the bill by \$86,600 GPR and \$120,900 FED in 2002-03 and delete all of the provisions in the bill relating to this item.
- 14. LFB Paper #479 (Provider Certification Staff). Adopt Alternative 3. Delete provision. Reduce funding in the bill by \$72,300 GPR and \$72,300 FED in 2002-03 and delete 2.0 positions (1.0 GPR position and 1.0 FED position) in 2002-03.
- 15. LFB Paper #480 (School-Based Health Services). Adopt the modification. Increase estimated revenues to the general fund by \$5.9 million annually to reflect a reestimate of MA reimbursement for school-based health services.
- 16. LFB Paper #481 (Income Limit for Medically Needy Recipients). Adopt Alternative 2. Increase MA benefits funding by \$500,800 GPR and \$706,000 FED in 2002-03 to begin increasing the AFDC standard by the increase in the CPI in the prior year, beginning on January 1, 2003.
- 17. LFB Paper #520 (Family Care Funding and Ombudsman Services). Under A, adopt the modification. Delete \$1,428,100 GPR and \$47,400 FED in 2001-02 and delete \$1,519,500 GPR and provide \$2,056,200 FED in 2002-03 to reflect a reestimates of the costs of Family Care in the 2001-03 biennium.

Adopt Alternative B1. Increase funding in the bill by \$3,032,100 GPR and \$8,202,000 FED in 2002-03 to establish a new CMO site in Kenosha County, beginning on July 1, 2002.

Adopt a modified Alternative C4 to increase funding in DHFS for MA administration by \$250,000 GPR and \$250,000 FED in 2001-02 and \$275,000 GPR and \$275,000 FED in 2002-03 and provide \$500,000 PR in 2001-02 and \$550,000 PR in 2002-03 and 1.0 PR position for the Board on Aging and Long-Term Care to retain base funding, with an inflation adjustment, and positions for Family Care external advocacy services.

Provide \$700,000 GPR and \$700,000 FED in 2002-03 for developmental funds for expanding Family Care into other counties in the 2003-05 biennium.

Provide \$5,000 GPR annually to restore funding for the Wisconsin Council on Long-Term Care, and extend the current sunset date for the Council to June 30, 2003.

18. LFB Paper #521 (COP and Other Community-Based Long-Term Care Programs). Approve the Governor's recommendation to fully fund COP slots that were created in 2000-01 by adopting Alternative A1. Also, approve the Governor's recommendation to fund 60

new CIP IB slots and 686 CIP II slots in 2001-02 by adopting Alternative B1.

Provide \$1,898,600 GPR and \$2,090,800 FED in 2001-02 and \$5,296,800 GPR and \$7,498,900 FED in 2002-03 to fund 388 new CIP IB slots in 2001-02 and another 300 CIP IB slots in 2002-03 at an enhanced reimbursement rate of \$65 per day.

Provide \$1,000,000 GPR and \$1,424,200 FED in 2001-02 and \$1,500,000 GPR and \$2,114,700 FED in 2002-03 to increase reimbursement rates as follows: (a) for CIP II, an increase from \$40.78 per day to \$41.86 per day in 2001-02 and \$42.23 per day in 2002-03; and (b) for CIP IB, an increase from \$48.33 per day to \$49.67 per day in 2001-02 and \$50.33 per day in 2002-03.

Provide \$2,851,300 GPR and \$3,003,600 FED in 2001-02 and \$7,147,300 GPR and \$8,756,400 FED in 2002-03 to provide 1,000 additional COP-W slots in 2001-02 and an additional 960 COP-W slots in 2002-03.

Adopt Alternative E2. Delete \$986,500 GPR and \$1,405,100 FED in 2001-02 and \$4,406,100 GPR and \$6,211,600 FED in 2002-03 to increase total funding for the PACE/WPP programs by 8% in each year of the biennium, rather than 13.0% in 2001-02 and 22.8% in 2002-03, as recommended by the Governor as part of the MA base reestimate.

- 19. MA Case Management for Children with Asthma. Provide \$150,000 GPR annually for DHFS to provide as grants to public health departments in Milwaukee County to serve as the state match for federal medical assistance funds to support case management services for children with asthma. Increase MA benefits funding by \$213,600 FED in 2001-02 and \$211,500 FED in 2002-03 to reflect additional MA claiming for these case management services.
- 20. Rural Dental Health Clinic. Provide \$618,000 GPR in 2001-02 and \$232,000 GPR in 2002-03 to fund a rural dental health clinic in Ladysmith in Rusk County.
- 21. Children's Vision Initiative. Require all children entering public kindergarten to provide evidence that they have had an eye examination performed by a person licensed to practice optometry or medicine. The eye exam would be required to include: (a) a brief history of general and eye health for the child and family; (b) general external observation of the child's eyes and surrounding structures; (c) examination of the inside of the eye through an undilated pupil; (d) gross measurement of peripheral vision; (e) evaluation of eye coordination and function; and (f) visual acuity for each eye.

Specify that students who are in financial need and do not have health care insurance coverage for eye exams, through private insurance or public sector health plans, could receive exams at no cost from local optometrists, ophthalmologists and other medical doctors who have agreed to provide the exams at no cost, under the program.

Specify that evidence of an exam would be required to be provided to the child's school district no later than December 31 of their first year of attendance, beginning with the 2002-03



school year. Specify that there would be no penalty if a student fails to provide evidence of an exam.

Require evidence of the exam to be provided on a form adopted by the Medical Examining Board and Optometry Examining Board, no later than January 1, 2002. Require the form to include a place for the examining doctor to indicate which required elements of the exam were performed, and whether follow-up care is recommended for the child. Require the Department of Regulation and Licensing to print the forms for distribution to Wisconsin public schools by May 31, 2002.

Specify that a health benefits contract would not be required to pay for a professional eye examination unless such examinations are covered by the contract in force at the time of the examination.

- 22. Report on Implementation of Comprehensive Community Services Benefit. Require DHFS to submit a report to the Joint Committee on Finance on the status of the implementation of the comprehensive community services benefit under MA. Require DHFS to submit the report by the first day of the sixth month following the effective date of the bill.
- 23. Community Support Program. Provide \$1,000,000 GPR in 2001-02 and \$1,000,000 GPR in 2002-03 for DHFS to increase state support for the community support program.
- 24. Life-Span Respite Care. Provide \$112,500 GPR in 2001-02 and \$112,500 GPR in 2002-03 to increase funding for the life-span respite care project.
- 25. Estate Recovery Report. Request that the Joint Committee on Audit to request the Legislative Audit Bureau to conduct a study of estate recovery that includes, but is not limited to: (a) the amount of funds recovered from nursing homes, personal care, COP, MA home- and community-based waiver programs and home health; and (b) the amount of recoveries by the size of the estate.
- 26. Standards for Health Maintenance Organizations. Require that, for contracts beginning January 1, 2002, health maintenance organizations (HMOs) serving MA and BadgerCare recipients within a specific zip code have a sufficient number of primary care providers available within 30 miles of that zip code to ensure MA and BadgerCare recipients enrolled in the HMO are able to adequately access services.

[Change to Bill: \$74,215,200 GPR, -\$146,427,200 FED, \$154,885,400 SEG, \$1,687,400 PR, \$11,800,000 GPR-REV, \$108,706,700 GPR-Lapse, \$5,672,800 SEG-REV, 1.0 PR position, -1.0 GPR position and -1.0 FED position]

AMDT TO BUDGET SUB AMDT

See form AMENDMENTS — COMPONENTS & ITEMS.

SENATE AMENDMENT

SENATE AMENDMENT

TO SENATE SUBSTITUTE AMENDMENT 1,

TO 2001 SENATE BILL 55

At the locations indicated, amend the substitute amendment [amendment] as follows:

#. Page 918, line ? ... delete "arphyreuses" and substitute " an oph thalmologist livensch unde ch. 448, or had his or her eyes evaluated by " 3.

#. Page ... line approximately for the eyes evaluated by " 3.

##. Page 918, line 2: a ster examination insert " or

evalue tion "

1/4. Page 9.18., line !?.. afte "examination" insert

evaluation "

#. Page 918., line 18: (after "examinations" insert

" or evaluations";

Page . . . , line .

(Knd)

[rev: 6/15/01 2001DF16(fm)SB]

STATE OF WISCONSIN – **LEGISLATIVE REFERENCE BUREAU** – LEGAL SECTION (608–266–3561)

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SDC:.....Keckhaver – CN1521, Children's vision initiative FOR 2001–03 BUDGET — NOT READY FOR INTRODUCTION CAUCUS SENATE AMENDMENT TO SENATE SUBSTITUTE AMENDMENT 1, TO 2001 SENATE BILL 55

1	At the locations indicated, amend the substitute amendment as follows
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- 2 1. Page 917, line 24: after "examinations" insert "and evaluations".
- 2. Page 918, line 2: after "by" insert "an ophthalmologist licensed under ch.
- 4 448, or had his or her eyes evaluated by".
- 5 3. Page 918, line 2: after "examination" insert "or evaluation".
- 6 4. Page 918, line 12: after "examination" insert "or evaluation".
- 7 5. Page 918, line 18: on lines 18 and 19, after "examinations" insert "or evaluations".